

CITY OF ANNAPOLIS ART IN PUBLIC PLACES COMMISSION
Commission of Original Performance Art FY 2007

1. Name of Organization/Individual:

Mailing Address:

City

State

Zip Code

Federal Identification

Number (if applicable)

Date of Incorporation

(Attach copy of IRS Letter of Determination of Tax Exempt status if applicable.)

Name of Contact Person:

Title:

Home Phone:

Work Phone:

Fax:

Email:

2. In the space below, briefly describe your organization, its mission, ongoing activities and the audience it serves. (Individual applicants may attach a resume, which should include related professional experience and references.)

3. In the space below, describe your primary arts activities.

4. Describe the performance art product you wish to create.

5. How does your creative vision reflect the themes of Annapolis Charter 300?

6. Who is the intended audience for this performance? How do you project that it will be performed? Where could it be performed? What would be the most appropriate time of year for its premiere?

8. Budget for Project

Cash Expenses		Cash Income Source	
Item	Amount	Cash Income Source for Item	Amount
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
<i>Total Cash Expenses</i>	\$	<i>Total Cash Income</i>	\$
		<i>GRANT REQUEST:</i>	\$

In-kind/donated services may be identified below. In-kind/donated services may be used to demonstrate the breadth of support for the project.

In-kind/donated:	
Item	Amount
	\$
	\$
	\$
<i>Total In-kind/donated:</i>	\$

Signature of Preparer

Title/Authority

Date: _____

If you wish, you may attach supplemental materials.